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Date: December 16, 2005
To: Jungwon Chang - 2154
Location: United States Patent and Trademark Office
Fax No.: 571-273-8300
From: Valerie M. Davis - 50,203
Subject: 10/802,159- Popovich, et al. Confirmation No.: 4139

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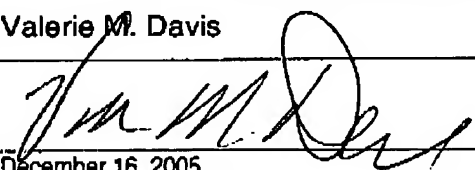
Enclosed herewith, please find a RESPONSE TO FINAL AMENDMENT for filing in the above-identified application.

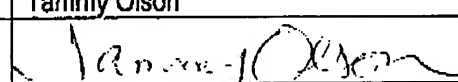
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/802,159
	Filing Date	March 17, 2004
	First Named Inventor	Popovich, et al.
	Group Art Unit	2154
	Examiner Name	Jungwon Chang
	Attorney Docket Number	CM05518H
Total Number of Pages in this Submission		

ENCLOSURES		(check all that apply)
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____	<input type="checkbox"/> Alter Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Valerie M. Davis	Registration No.	50,203
Signature			
Date	December 16, 2005		

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Tammy Olson		
Signature		Date	December 16, 2005

Appl. No. 10/802,159
Amdt. Dated December 16, 2005
Reply to Office Action of 04/21/05

Docket No. CM05518H
Customer No. 22917

UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICANT(S) Popovich, et al. GROUP ART UNIT: 2154
APPLN. NO.: 10/802,159 EXAMINER: Jungwon Chang
FILED: March 17, 2004 Confirmation No. 4139
TITLE: REGIONAL REGISTRATION FOR A MOBILE IP ENABLED SYSTEM

DEC 16 2005

Date of deposit: December 16, 2005

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Signature of Person Mailing Paper

Tammy Olson

Printed Name of Person Mailing Paper

AMENDMENT IN RESPONSE TO FINAL REJECTION

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated 10/19/2005, Paper No. 20050728, please amend the above-identified application as follows:

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.